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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No. A-68950-1/DJB/RMS/DCF

Anticipated Classification of
this Application:
Class: Subclass:

Prior Application:
Examiner: _____
Art Unit: _____

"EXPRESS MAIL" MAILING LABEL
NUMBER EL659498511US
DATE OF DEPOSIT February 12, 2001
I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING
DEPOSITED WITH THE UNITED STATES POSTAL SERVICE
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CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED
TO: BOX PATENT APPLICATION FEE, ASSISTANT COMMISSIONER
FOR PATENTS, WASHINGTON, DC 20231.

TYPED NAME Vincent Diaz
SIGNED Vincent Diaz

Box PATENT APPLICATION FEE
Assistant Commissioner for Patents
Washington, DC 20231

Sir:
This is a request for filing an
____ Original
____ Continuation
____ Divisional
X Continuation-in-part

application under 37 C.F.R. 1.53(b), in the name of Todd Dickinson, for ALTERNATIVE SUBSTRATES AND FORMATS FOR BEAD-BASED ARRAY OF ARRAYS™. This ____ application ____ continuation ____ divisional X continuation-in-part claims priority to provisional application Serial No. 60/181,631, filed on February 10, 2000.

1. (a) X Enclosed is a new application.
(b) ____ Enclosed is a continuation-in-part application.
(c) ____ Enclosed is a copy of the prior application.
2. (a) ____ Enclosed is a new Declaration.
(b) ____ Enclosed is a copy of the prior executed Declaration as originally filed.
(c) ____ Enclosed is a Combined Declaration/Power of Attorney.
(d) ____ Enclosed is a copy of the Declaration and Power of Attorney as originally filed.
3. (a) ____ Enclosed is a Small Entity Affidavit.
(b) ____ Enclosed is a copy of the prior Small Entity Affidavit as originally filed.
(c) ____ A Small Entity Affidavit is of record in the prior application.

4. The filing fee is calculated below: Claims as filed in the prior application, less any claims canceled by amendment below:

	(Col. 1)	(Col.2)	<u>SMALL ENTITY</u>			<u>OTHER THAN A SMALL ENTITY</u>	
For:	<u>No. Filed</u>	<u>No. Extra</u>	<u>Rate</u>	<u>Fee</u>	<u>Or</u>	<u>Rate</u>	<u>Fee</u>
Basic Fee				\$355.00			\$690.00
Total Claims	<u> </u> - 20 =	<u> 0 </u>	<u> </u> x 9 =	\$ <u> 0 </u>	OR	<u> </u> x \$18 =	\$ <u> </u>
Indep Claims	<u> </u> - 3 =	<u> 0 </u>	<u> </u> x 39 =	\$ <u> 0 </u>	OR	<u> </u> x \$78 =	\$ <u> </u>
[] Multiple Depen Claims			+ \$135 =	\$ <u> </u>	OR	+ \$260 =	\$ <u> </u>
Total				\$ <u> </u>			\$ <u> </u>

* If the difference in Col. 1 is less than zero, enter "0" in Col. 2.

5. The Commissioner is hereby authorized to charge any additional fees which may be required, including extension fees, or credit any overpayment to Deposit Account No. 06-1300 (Order No.).
6. X No check is enclosed to pay the fee.
7. Cancel in this application original claims of the prior application before calculating the filing fee. (At least one independent claim must be retained for filing purposes.)
8. Amend the specification by inserting before the first line the sentence:
9. (a) X Informal drawings are enclosed, 16 sheets.
(b) Formal drawings are enclosed, sheets.
10. (a) Priority of application Serial No. filed on in is claimed under 35 U.S.C. 119.
(b) The certified copy has been filed in prior application Serial No. filed on .
11. (a) An Assignment is enclosed.
(b) Enclosed is a copy of the prior assignment as originally filed.
12. The prior application is assigned of record to .
13. X The power of attorney in the prior application is to:

FLEHR HOHBACH TEST ALBRITTON & HERBERT, LLP

- (a) The power appears in the original papers in the prior application.

(b)___ Since the power does not appear in the original papers, a copy of the power in the prior application is enclosed.

(c) X Address all future communications to:

Robin M. Silva, Esq.
FLEHR HOHBACH TEST ALBRITTON & HERBERT LLP
Suite 3400, Four Embarcadero Center
San Francisco, California 94111-4187
Telephone: (415) 781-1989

14. ___ A preliminary amendment is enclosed. (Claims added by this amendment have been properly numbered consecutively beginning with the number next following the highest numbered original claim in the prior application.)
15. ___ A Prior Art Statement is enclosed.
16. ___ I hereby verify that the attached papers are a true duplicate of prior application Serial No. ___ as originally filed on ____.

Date: February 12, 2001 Quinn C. Justice Reg. No.: 44,685
for Robin M. Silva
Registration No. 38,304

Address of Signer:

Suite 3400, Four Embarcadero Center
San Francisco, California 94111-4187
Telephone: 415-781-1989

X Attorney or agent of record

___ Filed under Section 1.34(a)

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